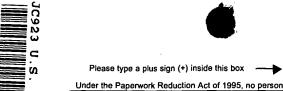
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UTILITY PATENT APPLICATION

Attorney Docket No. Shahzi Iqbal First Inventor

09/21

Date

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(Only for new nonprovisional applications under 37 CFR 1.53(b))		Expre	ss Mail Label No.		, s	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages 17] Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s))			
- Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 2] 5. Oath or Declaration [Total Pages] a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76			10. 37 CFR 3.73(b) Statement Power of Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) Of prior application No.: Prior application information: Examiner Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS						
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)						
Name	Robert Chin					
12909 Stanzel Drive						
Address						
City	Austin	State	TX	Zip Code	78729	
Country	USA 7	elephone	512-219-8575	Fax	512-219-858	
Name (PrintlType)	Robert Ghia	Re	gistration No. (Attorney	(Agent)		

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I **SMALL ENTITY** OR **SMALL ENTITY** (Column 2) (Column 1) FOR **NUMBER FILED** NUMBER EXTRA RATE FEE RATE FEE BASIC FEE _{\$}\$345 OR (37 CFR 1.16(a)) TOTAL CLAIMS 25 5 x \$ 9 45 minus 20 = OR 4 1 INDEPENDENT CLAIMS 40 40 minus 3 = OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 135 OR \$575 OR TOTAL TOTAL * If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II OR SMALL ENTITY **SMALL ENTITY** (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total Minus _ (37 CFR 1,16(c)) OR Independent Minus (37 CFR 1,16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR ĬÜ TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS **HIGHEST** ADDI-ADDI-REMAINING NUMBER **PRESENT RATE TIONAL** RATE TIONAL **AMENDMENT AFTER** PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR ΛR Total ** Minus = OR *** Independent Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING **PRESENT** NUMBER RATE TIONAL TIONAL **RATE AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total Minus \$ (37 CFR 1.16(c)) OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT, FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.